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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b> (37 CFR 1.63)	<b>Attorney Docket Number</b>	00497-07
	<b>First Named Inventor</b>	HAO, Zhonglin
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	
	<b>Filing Date</b>	July 19, 2002
	<b>Group Art Unit</b>	
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
<b>Examiner Name</b>		

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**SPERM SPECIFIC PROTEINS**

the specification of which  
☐ is attached hereto  
OR  
☒ was filed on (MM/DD/YYYY) **01/19/01** as United States Application Number or PCT International Application Number **PCT/US01/01717** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 356(b) of any foreign application(s) for patent or inventor's certificate, or 356(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/176,885	01/19/2000	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
PCT/US01/01717	January 19, 2001	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02C attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

Place Customer  
Number Bar Code  
Label here

Name	Registration Number	Name	Registration Number
John P. Breen	38,833		
Robert J. Decker	44,056		
Robert S. MacWright	32,425		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number  OR ☒ Correspondence address below

Name	John P. Breen, University of Virginia Patent Foundation				
Address	1224 West Main Street, Suite 1-110				
Address					
City	Charlottesville	State	VA	ZIP	22903
Country	US	Telephone	434-243-6103	Fax	434-924-2493

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
Zhonglin	HAO

Inventor's Signature	<i>Zhonglin</i>	Date	6/5/02
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Residence: City	Charlottesville	State	VA	Country	US	Citizenship	IN
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Post Office Address	285 Peyton Court, No. 4	2895 Chimney Springs Crville.
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Post Office Address	VA 22911
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City	Charlottesville	State	VA	ZIP	22903	Country	US
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☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

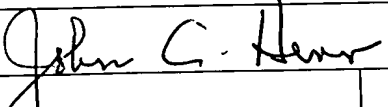
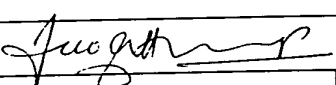
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## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 1 of 2

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
John C.		HERR	
Inventor's Signature 		Date <u>7/14/02</u>	
Residence: City <u>Charlottesville</u>	State <u>VA</u>	Country <u>US</u>	Citizenship <u>US</u>
Mailing Address <u>2545 Cedar Ridge Lane</u>			
Mailing Address			
City <u>Charlottesville</u>	State <u>VA</u>	ZIP <u>22901</u>	Country <u>US</u>
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Friederike L.		JAYES	
Inventor's Signature		Date	
Residence: City <u>Apex</u>	State <u>NC</u>	Country <u>US</u>	Citizenship <u>DE</u>
Mailing Address <u>2025 Park Summit Boulevard</u>			
Mailing Address			
City <u>Apex</u>	State <u>NC</u>	ZIP <u>27502</u>	Country <u>US</u>
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Jagathpala		SHETTY	
Inventor's Signature 		Date <u>06/27/02</u>	
Residence: City <u>Charlottesville</u>	State <u>VA</u>	Country <u>US</u>	Citizenship <u>IN</u>
Mailing Address <u>287-3 Peyton Court</u>			
Mailing Address			
City <u>Charlottesville</u>	State <u>VA</u>	ZIP <u>22903</u>	Country <u>US</u>

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## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 2 of 2

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Michael J.

WOLKOWICZ

Inventor's  
Signature

Date 6/27/02

Residence: City Charlottesville

State VA

Country US

Citizenship US

Mailing Address 2607 Hydraulic Road, Apartment E

Mailing Address

City Charlottesville

State VA

ZIP 22901

Country US

Name of Additional Joint Inventor, if any:

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Given Name (first and middle [if any])

Family Name or Surname

Inventor's  
Signature

Date

Residence: City

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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>	Attorney Docket Number	00497-07
	First Named Inventor	HAO, Zhonglin
	<b>COMPLETE IF KNOWN</b>	
	Application Number	
	Filing Date	July 19, 2002
	Group Art Unit	
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
Examiner Name		

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified YES	Copy Attached? NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(b) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)
60/176,885	01/19/2000

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[Page 1 of 2]

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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
PCT/US01/01717	January 19, 2001	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02C attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact business in the Patent and Trademark Office connected therewith: ☐ Customer Number  OR ☒ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
John P. Breen	38,833		
Robert J. Decker	44,056		
Robert S. MacWright	32,425		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number or Bar Code Label  OR ☒ Correspondence address below

Name	John P. Breen, University of Virginia Patent Foundation				
Address	1224 West Main Street, Suite 1-110				
City	Charlottesville	State	VA	ZIP	22903
Country	US	Telephone	434-243-6103	Fax	434-924-2493

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Zhonglin		HAO	
Inventor's Signature			Date
Residence: City	Charlottesville	State	VA
		Country	US
Post Office Address	285 Peyton Court, No. 4		
Post Office Address			
City	Charlottesville	State	VA
		ZIP	22903
		Country	US

☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 1 of 2

Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
John C.		HERR	
Inventor's Signature		Date	
Residence: City Charlottesville		State VA	Country US
Mailing Address 2545 Cedar Ridge Lane		Citizenship US	
Mailing Address			
City Charlottesville		State VA	ZIP 22901
Country US			
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Friederike L.		JAYES	
Inventor's Signature <i>Friederike L. Jayes</i>		Date 07/19/2002	
Residence: City Apex Cary		State NC	Country US
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Mailing Address			
City Cary		State NC	ZIP 27511
Country US			
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Jagathpala		SHETTY	
Inventor's Signature		Date	
Residence: City Charlottesville		State VA	Country US
Mailing Address 287-3 Peyton Court		Citizenship IN	
Mailing Address			
City Charlottesville		State VA	ZIP 22903
Country US			

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PTO/SB/02A (11-00)

## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 1 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Michael J.		WOLKOWICZ	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Charlottesville	VA	US	US
Mailing Address 2607 Hydraulic Road, Apartment E			
Mailing Address			
City	State	ZIP	Country
Charlottesville	VA	22901	US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
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Mailing Address			
Mailing Address			
City	State	ZIP	Country

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